

A little goes a long way in war-torn Afghanistan

07/07/07

ON THE
AGENDA

HEIDI
KINGSTONE



The road to the hospital is paved – quite unusual in Kabul – and the sign outside rather nondescript and without the usual idiomatic English that is as often amusing as it is confusing.

It isn't my normal thing to haunt the halls of mental hospitals but something made me ask my driver to stop. Gates surround the grounds of the decaying building, but that is nothing unusual here.

Dr Sayeed Abdul Ahad Qureshi had just returned from Friday prayers when we arrived, and he seemed rather uninterested in this foreigner who was simply a curious interloper. We stood in the driveway under the baking sun, talking. I'm not sure what I said, except that my father is a psychiatrist. I wondered what conditions would be like here in Kabul – where there's a constant fight for daily survival anyway – and in a mental hospital, which usually finds itself on the bottom rung. I wondered how bad things would be.

As we continued our conversation, Qureshi, the deputy director of the hospital, offered to show us around. It was the last thing I wanted. I hate hospitals (I have little resistance to sadness), but I found myself looking at dark wards and

a crowded room of miserable people lying or sitting on threadbare sheets. I felt uncomfortable and voyeuristic.

In one empty ward, a young woman lay on a bed surrounded by her family. The room was big and gloomy, and in Afghanistan there are so many reasons to be depressed: trauma from a lifetime of war and destruction; a country where few young people see any future; and for women, too often a lifetime of servitude and abuse.

A few days later I returned and asked for a list of the drugs they needed, and I e-mailed my Toronto connections. The first was my friend Sandy Fainer, who had introduced me several years ago to Barry Sherman, the CEO of Apotex, a giant generic-drug firm based in Canada, which started the ball rolling.

Barry said he would see what he could do. For a while I heard nothing more. Then I received an e-mail asking for my address and informing me that 14 boxes of supplies, delivered free, would be donated to the hospital.

I had to bide my time and wait until the parcels arrived before I went to the Mental Health Hospital, as I had not actually mentioned my plan. When we drove up in the 4x4 filled to the top, and I explained what this was, I could actually see the joy on Dr Qureshi's face.

It was one of those intensely moving moments when you realise that having done something like this has made a small, unexpected difference. It's one of

the gratifying things about being in Afghanistan. Small initiatives can make an impact.

That day, in mid-May, Dr Qureshi told me there were no drugs in the hospital. Every few weeks the Ministry of Health is supposed to send supplies, but since mid-March nothing had come. So we registered the drugs with each other, following some elaborate ad hoc, Soviet-style bureaucratic procedure, with each ensuring the other that the medicine would go to the patients and not into the black market for a quick profit. On the drugs list I wrote that the medicine had been specifically requested for this hospital so it couldn't be confiscated and given to anyone else.

All of a sudden I looked around the doctor's office and realised that out of half a dozen people who had gathered, I was the only woman.

White sheets covered the chairs, the desk, the sofa, and the doctor had taken off his slip-on plastic sandals that everyone here wears. There really was an element of excitement, and gratitude, in the sense that someone actually cared and tried to do something, and that there were some results. We drank green Afghan tea out of clear glass mugs, while someone brought in a stamp that put the official seal on our unofficial deal.

A strange triumvirate, London, Toronto, Kabul, a serendipitous decision to stop at a scruffy-looking hospital where, when I drove away the last time, there was a herd of goats rummaging at the door.